

## Janet Letourneau

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**From:** Jason Kovach <dietmax@live.com>  
**Sent:** Monday, January 20, 2020 4:00 PM  
**To:** Janet Letourneau; Raymond Rogozinski; Robin Manuele; Ellen Zoppo  
**Subject:** Soap Box Derby  
**Attachments:** road closure request.pdf

Hello all,

We are looking to have dates approved for the 2020 race season. Just like in the past years 1 weekend will be used only as a backup. Also June will be one day or the other depending on weather.

If you need me to attend any meetings for discussion please notify me when and where. I thank you all for helping to make this a great activity for the children of Bristol.

Sincerely,

Jason Kovach  
Race Director

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City of Bristol  
Department Of Public Works  
Bristol, Connecticut 06010

Special Event – Permit Application

Date: current date

Applicant Information

Name of contact:	Jason Kovach
Street Address:	367 Columbus Ave
City/State/Zip:	Meriden CT 06451
Telephone Number:	203-901-9939
Alternate Telephone Number:	203-999-8205
Email address or web site:	dietmax@live.com

Event Information

Requested location:	James P. Casey Rd. Bristol
Requested date(s)/Time(s):	To: April 4th + 5th
From: 6:00 AM / 7: PM	May 2nd + 3rd
Rain Date:	N/A
Event Name:	Bristol Soapbox Derby
Event Sponsor/Purpose:	All American Soapbox Derby event
<input checked="" type="checkbox"/> Non-Profit <input type="checkbox"/> For Profit	Entry Ticket Price: n/a
Expected attendance:	30 +
Where will attendees park?	Street
Number of vendors/booths:	none

Please check all that apply:

Will there be amplified entertainment

☐ Yes ☒ No

Will there be items for sale

☐ Yes ☒ No



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City/State/Zip:	Meriden CT 06451
Telephone Number:	203-901-0939
Alternate Telephone Number:	203-999-8205
Email address or web site:	dietmax@live.com

Event Information

Requested location:	James P. Casey Rd. Bristol
Requested date(s)/Time(s):	To: June 6th + 7th
From: 8:00 AM / 5:00 PM	
Rain Date:	N/A
Event Name:	Bristol Soapbox Derby
Event Sponsor/Purpose:	All American Soapbox Derby event
<input checked="" type="checkbox"/> Non-Profit <input type="checkbox"/> For Profit	Entry Ticket Price: n/a
Expected attendance:	30 +
Where will attendees park?	Street
Number of vendors/booths:	none

Please check all that apply:

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☐ Yes ☒ No

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Telephone Number:	203-901-0939
Alternate Telephone Number:	203-999-8205
Email address or web site:	dietmax@live.com

Event Information

Requested location:	James P. Casey Rd, Bristol
Requested date(s)/Time(s):	To: September 12th + 13th
From: 6:00 AM / 7:00 PM	October 3rd + 4th
Rain Date:	N/A
Event Name:	Bristol Soap box Derby
Event Sponsor/Purpose:	All American Soap box Derby event
<input checked="" type="checkbox"/> Non-Profit <input type="checkbox"/> For Profit	Entry Ticket Price: n/a
Expected attendance:	30 +
Where will attendees park?	Street
Number of vendors/booths:	none

Please check all that apply:

Will there be amplified entertainment

☐ Yes ☒ No

Will there be items for sale

☐ Yes ☒ No

Tents or Canopies

☒ Yes ☐ No

Open flames or cooking

☐ Yes ☒ No

Fireworks

☐ Yes ☒ No

Temporary fencing

☐ Yes ☒ No

First Aid area

☐ Yes ☒ No

Portable toilets

☒ Yes ☐ No

Traffic Control Requested

☐ Yes ☒ No

(additional fee will apply)

Police Chief may determine that Traffic Control is required even if not requested.

Public Street closure requested

☒ Yes ☐ No

Street: James P. Casey

Closure location

beginning: Eastwood Rd. ending: Perkins St.

Who will be responsible for security/safety at the event:

Jason Kovach

Barricades needed to block traffic

☒ Yes ☐ No

Rubbish Disposal:

☒ Will provide own containers and disposal

☐ Request City of Bristol containers and disposal (additional fee may apply)

Alcoholic Beverages:

**No alcoholic beverages will be allowed for sale or consumed at the site of the event. The applicant agrees to publicize the no alcoholic beverages restriction in their event notices, tickets and site signage.**

Insurance Requirements:

To hold an event on City property - a minimum of \$1,000,000 combined single limit Bodily injury, property damage per occurrence and \$2,000,000 aggregate coverage. The City of Bristol must be named as additional insured. Copy Provided ☒ Yes ☐ No

• Name of Insurance Company:

• Policy Number:

• Effective Date(s):

Will Send Prior to Event Dates.

Hold Harmless Clause:

*Applicant agrees to hold the City of Bristol harmless and will indemnify the City of Bristol for damages sustained as a result of an injury or property damage for which the City of Bristol may be held responsible, resulting from the event identified in the agreement for the use of City property. I will abide by all policies, rules, regulations and conditions of use as written. I understand that the special event permit is not transferable to any other individual or group.*

(Signed as Event Permit Application)

Signature of Applicant: Jason Howard

\*\*\*\*\* City Use Only \*\*\*\*\*

- ☐ Superintendent of Parks and Recreation: \_\_\_\_\_  
Recommend approval / deny request
- ☐ Public Works Director: \_\_\_\_\_  
Recommend approval / deny request
- ☐ Police Department: \_\_\_\_\_  
Recommend approval / deny request  
Police Traffic Control is / is not required.
- ☐ Fire Department: \_\_\_\_\_  
Recommend approval / deny request
- ☐ Comptroller: \_\_\_\_\_ (Insurance Review)  
Recommend approval / deny request
- ☐ City Council Real Estate Committee: \_\_\_\_\_

Approving Authority: \_\_\_\_\_

☐ Approved ☐ Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Any Conditions of Approval: \_\_\_\_\_

Copies to:

Mayors Office  
P.W. Dispatcher  
Police Department  
Fire Department  
Comptroller  
Applicant  
File

Public Works/pwadmin/Forms/Special Event Permit Application

